

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM JC/OH  
COVER SHEET PG 1**

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00037864		<b>2 Total pages filed:</b> 4				
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR David</div> <div>FIRST David</div> <div>MI D</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>NICKNAME</div> <div>LAST Garcia</div> <div>SUFFIX</div> </div>				<b>OFFICE USE ONLY</b>  Date Received        Date Hand-delivered or Date Postmarked   <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Receipt #</td> <td style="width: 50%; border: none;">Amount \$</td> </tr> </table> Date Processed  Date Imaged		Receipt #	Amount \$
	Receipt #	Amount \$						
<div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX; [REDACTED]</div> <div>APT / SUITE #;</div> <div>CITY; Corinth</div> <div>STATE; TX</div> <div>ZIP CODE 76208</div> </div> <div style="margin-top: 5px;"> <input checked="" type="checkbox"/> Change of Address       </div>								
<b>5 CANDIDATE/ OFFICEHOLDER PHONE</b>	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE ( [REDACTED] )</div> <div>PHONE NUMBER [REDACTED]</div> <div>EXTENSION</div> </div>							
<b>6 CAMPAIGN TREASURER NAME</b>	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR</div> <div>FIRST Ronnie</div> <div>MI</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>NICKNAME</div> <div>LAST Phillips</div> <div>SUFFIX</div> </div>							
	<div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE); [REDACTED]</div> <div>APT / SUITE #;</div> <div>CITY; Lake Kiowa</div> <div>STATE; TX</div> <div>ZIP CODE 76240-9246</div> </div>							
<b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or Business)								
<b>8 CAMPAIGN TREASURER PHONE</b>	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE ( [REDACTED] )</div> <div>PHONE NUMBER [REDACTED]</div> <div>EXTENSION</div> </div>							
<b>9 REPORT TYPE</b>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded \$500 limit</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>							
<b>10 PERIOD COVERED</b>	<div style="display: flex; justify-content: space-between;"> <div>           Month / Day / Year            07 / 01 / 2018         </div> <div>THROUGH</div> <div>           Month / Day / Year            12 / 31 / 2018         </div> </div>							
<b>11 ELECTION</b>	<div style="display: flex; justify-content: space-between;"> <div>           ELECTION DATE            Month / Day / Year            / /         </div> <div>           ELECTION TYPE  <input type="checkbox"/> Primary   <input type="checkbox"/> Runoff   <input type="checkbox"/> Other Description  <input type="checkbox"/> General   <input type="checkbox"/> Special         </div> </div>							
<b>12 OFFICE</b>	OFFICE HELD (if any) County Criminal Court #3		<b>13 OFFICE SOUGHT</b> (if known)					

**GO TO PAGE 2**

**FORM JC/OH  
COVER SHEET PG 2**

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

F-4E05-4C39-BDBD-FD17E

01/15/19 - 09:30:18

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

# SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$\$0.00
2.	<input type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$\$0.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$\$0.00
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$\$0.00
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$\$0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$\$0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$\$0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$\$0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$\$0.00

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.  
.. Complete only if "Report Type" on page 1 is marked "Final Report" ..

**1 C/OH NAME**

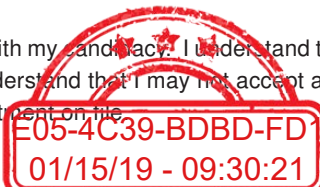
David D Garcia

**2 Filer ID (Ethics Commission Filers)**

00037864

**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



Signature of Candidate / Officeholder

**4 FILER WHO IS NOT AN OFFICEHOLDER**

.. Complete A & B below *only* if you are not an officeholder. ..

**A. CAMPAIGN FUNDS**

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

**5 OFFICEHOLDER**

.. Complete this section *only* if you are an officeholder ..

- ☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.



Signature of Officeholder